

REAL ESTATE COMMISSION

64 South Street Concord, NH 03301 (603) 271-2748 Fax # (603) 271-1039 http://www.nh.gov/nhrec

Expiration Date		
License #	Date Processed	
License Dates	Form#	
Tradename Ref. #		
Check #	Amount	
(FOR OFFICE USE ONLY)		



FORM 3-RE FIRM APP. REV. 10/10

APPLICATION FOR LICENSE AS A REAL ESTATE FIRM

APPLICATION FEE \$100.00

Make checks payable to: TREASURER, STATE OF NEW HAMPSHIRE

PRINT OR TYPE. All questions must be answered in full. Do not leave any section blank, except where instructed to do so.

Name of sole proprietorship, partnership, association, corporation, limited liability company or any other business association in which the license is to be issued. (Note: The name MUST READ EXACTLY as it is registered with the NH Secretary of State):

Physical Address of principal place	ce of business:	CTDEET		
	STREET			
CITY	STATE		ZIP CODE	
Business Mailing Address:			······	
	ST	REET/PO BOX		
CITY	STATE		ZIP CODE	
Business Tel#:	Fax #:	E-Mail:		
Date of Registration:	If incorporated, State of inc	corporation:		
with the Secretary of State at ht	nust first register the name with the NH tp://www.sos.nh.gov/corporate/Forms.htm other firms), or Certificate of Authoriza	. A copy of the Certificate of	of Existence (for Corporations	
	artnership, association, corporation, limited ge in New Hampshire under a trade name?			
EXACTLY as it is registered with	the NH Secretary of State			
Date trade name expires at the off	rice of the NH Secretary of State:	·		

NOTE: If yes, a trade name registration must accompany this firm application, along with a recent copy of a Certificate of Good Standing from the NH Secretary of State. The trade name registration may be obtained from the Commission's website at http://www.nh.gov/nhrec.

- 3. List on the following page:
 - (a) ALL officers or partners of the firm;
 - (b) Their title within the firm;
 - (c) Their physical resident address; and
 - (d) Their designation as a licensed NH salesperson (S) or broker (B), if they are participating in the business of real estate brokerage.

NAME	TITLE	RESII	DENT ADDRESS	S/B
4. Principal Broker's Na	nme:		Principal Broker'	s License No.:
Principal Broker's Su	rety Bond Company Name:_			Bond No.:
5. List all licensees who	will be working at this main	office:		
NAME		LICENSE#	NAME	LICENSE :
below. Each branch offi License form and a copy of State is only required Branch License form is of	ce requires a license. To app of the Certificate of Existen- if the branch or branches are	oly for a branch ce, Certificate o registered with	* Certificate of Authorization. (Athe NH Secretary of State's Offichttp://www.nh.gov/nhrec/licens	lication for a Real Estate Branch A Certificate from the NH Secretary ce separately). An Application for
BRANCH NAME			BRANCH ADDRESS	

State of		
County of		
Subscribed and sworn to before me this	day of	20
(Notarial Seal)		
	NOTARY PUBLIC/JUSTICE OF THE PEACE	
	My commission expires:	
State of	TITLE (WITHIN FIRM):	
County of		
Subscribed and sworn to before me this	day of	20
(Notarial Seal)		
	NOTARY PUBLIC/JU	STICE OF THE PEACE
	My commission expires:	

SIGNATURE OF PRINCIPAL BROKER:_____

THE FOLLOWING POWER-OF-ATTORNEY FORM MUST BE COMPLETED FOR ALL NON-RESIDENT FIRMS

POWER-OF-ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: that the subscriber, desiring to conduct a real estate business in the State of New Hampshire in conformity with the laws thereof, hereby irrevocably constitutes and appoints the New Hampshire Real Estate Commission or its Executive Director, for the time being, to be the subscriber's true and lawful attorneys in aforesaid state, in compliance with the provisions of Chapter 331-A Revised Statutes Annotated, as inserted by the Laws of 1959, Chapter 222, and any amendments thereto, upon whom all lawful processes in any action or proceeding against the subscriber may be served and said subscriber hereby stipulates and agrees that any lawful process which is served on said attorneys shall be of the same legal force and validity as if served personally within this State.

IN WITNESS WHEREOF, the undersigned has e	secuted and subscribed to this Power-	-of-Attorney this
day of A.I	·	
	SIGNATURE O	F OWNER/AUTHORIZED OFFICIAL
		(TITLE WITHIN FIRM)
State of		
County of		
On this appeared the person who subscribed to the following	day of g instrument and acknowledged the s	A.D. 20 personally ame as his/her voluntary act and deed before me
	NOTARY PUBL	LIC/JUSTICE OF THE PEACE
(NOTARIAL SEAL)	My commission expires:	